Date Received:	



Lewis County Sheriff's Office Volunteer Application

Last N	ame:	First	Name:		Mid:
Addres	ss:				
City: _		Sta	nte:		Zip:
Any ot	her names:				
Drivers	s License #:		SSN:		
Home	Phone:		Work Pho	ne:	
Date of	f Birth:			(For Cri	minal History Only)
Backg	round Information	n:			_
	Any driving restric	ctions?:			
	Any driving endor	sements?:			
	Have you ever bee	en convicted of	a felony?:		
	Describe your avai	ilability to assis	t the LCSO at	irregular hour	s:
Arrest	History:				
	Have you ever bee	n given a Citati	on, Arrested,	Convicted, Ch	arged, or
	Questioned for any	y offense, violat	ion of any sta	tute or ordinan	ce, law, or
	regulation by any	civil or military	authority? (In	clude any con	victions or
	adjudication as a ju	uvenile.)			
	Yes No	If Y	YES, describe	below:	
Date	Location	Arresting	Original	Reduced	Disposition/Court

Date	Location	Arresting Agency	Original Charge	Reduced To	Disposition/Court Action

List below any Traffic and/or Parking Citations since you began driving in this country or any other country.

Date	Location	Issuing Agency	Charge	Charge Reduced	Disposition	Accident Related Y/N

ng an	d Experience:			
Expla	ain any Search & Rescue related training or experience. (Please provide			
docui	mentation if available):			
Pleas	e list any specialized training or experience. Include any experience in the			
medical field, military, Forest Service, Emergency Services, Climbing, extended				
hikin	g, etc.:			
Dlass	a list any amingrant (AnA an arymakila ata) talant (aannutan			
	e list any equipment (4x4, snowmobile, etc.), talent (computer			
progr	rammer, electrician, locksmith, mechanic, etc.), or other skills, that would			
	the LCSO:			

Questionnaire	
A. Yes () No ()	Have you ever been fired, discharged, or asked to resign from any position?
B. Yes () No ()	Have the police ever been called to your home?
C. Yes()No()	Have you ever committed any criminal violation that has gone undetected?
D. Yes () No ()	Have you or your spouse ever been sued or summoned into court?
E. Yes () No ()	Do you now or have you ever had any gambling debts?
F. Yes () No ()	Have you ever used an employer's money to gamble with?
G. Yes () No ()	Have you ever had an F.B.I. fingerprint check done for any reason?
H. Yes () No ()	In any employment setting, including military service, have you received any verbal or written reprimands or suspensions for violations of company policy?
I. Yes () No()	Would you have difficulty working with members of the opposite sex, different origin, race, religion, or nationality?
J. Yes () No ()	In any job that you've held, have you been involved in any physical or major verbal confrontations?
K. Yes () No ()	Would you be able to follow direct orders, even though you may not agree with them?
L. Yes() No()	In any previous employment setting, were you ever exposed to any high stress or an extreme emergency condition?
M. Yes () No ()	Have you ever operated a motor vehicle while under the influence of alcohol or drugs, to the point that you knew you should not have been driving?
N. Yes () No ()	Have you ever had your license revoked, suspended, or restricted?
O. Yes () No ()	Have you ever had any of your financial obligations turned over to a collection agency?
P. Yes () No ()	Have you ever been placed on court supervision or probation?

Have you ever had any court proceedings expunged?

Q. Yes () No ()

Please use this area to explain your YES answers to questions A-Q.

QUESTION #	DATE	EXPLANATION
Why do you war	nt to be a Lew	vis County Sheriff's Office Volunteer?
,		

I understand by signing this application, I am giving authorization to the Lewis County Sheriff's Office to make inquiries into my background, criminal history, and driving records. I hereby certify that the entries made by me on this statement are true, complete, and correct to the best of my knowledge and belief. Further, I do hereby release you, your organization, your agents, and others from any liability or damage which may result from furnishing information to Lewis County pursuant to this waiver and authorization to release information.

Signed:	Date:
If you are under 18 years of age, please have your par	rent or legal guardian sign below.
By signing for my son or daughter, I understand he or time to this program in Lewis County. I also understa completed by the Lewis County Sheriff's Office.	•
Signed: Parent or Guardian of:	
Please return this application to the Lewis County She	eriff's Office:
Lewis County Sheriff's Office 345 West Main Street, MS: SH Chehalis, WA 98532-1900	E01
For Official Use Only:	
Date Received:	
Spillman Information:	Employee #:
NCIC III/WACIC:	
Drivers Check:	
Liaison Deputy Signature:	
Special Services Sergeant Signature:	
Date Completed:	